<i>y</i>								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO								RD 09/68/39/					
Effective October 1, 2000									1765	9-1	nall	>	
CLAIMS AS FILED - PART I							. :	SMALL	ENTITY		OTHE	R THAN	
Γτα	OTAL CLAIMS		(Columi	n 1)	(Column 2)			TYPE		OR			
·			1.75					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 355.0	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			45 minus 20=		. 25			X\$ 9=		OR	X\$18=	450	
INDEPENDENT CLAIMS			9 minus 3 =		6			X40=			X80=	1100	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT				105		OR	}	480		
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=		OR	+270=	<u>L</u> ,	
•.								TOTAL	- L	OR	TOTAL	1,640	
4-10-07 (Column 1) (Column 2) (Column 3)								SMAL	L ENTITY	, on	OTHER		
A.		CLAIMS		HIGH	EST	(Column 3)	ſ	SWAL	ADDI		SMALL		
AMENDMENT A		REMAINING AFTER		NUMI PREVIO	DUSLY	PRESENT EXTRA		RATE			RATE	ADDI- TIONAL	
	Total	· 40	Minus	PAID	FOR	$\vdash A$	ŀ		FEE	$\frac{1}{2}$		FEE	
	Independent	. 9	Minus	7	3	= /	▍╽	X\$ 9=		OR	X\$18=		
¥		NTATION OF M	1	1	CLAIM	= /		X40≃		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								V	OR	+270=/	/	
		•					Ł	+135=	4	_	TOTAL		
		(Column 1)		(Colun	nn 2)	(Column 3)	A	ADDIT. FÉ	E	JOR.	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH	EST BER DUSLY	PRESENT EXTRA	Г		ADDI-	1		4001	
				PREVIO				RATE	TIONAL	_	RATE	ADDI- TIONAL	
	Total	* VIAISIADIAISIA I	Minus	PAID	-ОН		┟		FEE	-		FEE	
	Independent		Minus	***		= .	L	X\$ 9=		OR	X\$18=		
A.	FIRST PRESE	IRST PRESENTATION OF MULTIPLE DEPENDENT		CI AIM			X40=	İ	OR	X80≃			
							Γ	+135=		OR	+270=		
							L	TOTAL	_	-{ L	TOTAL		
		(Column 1)		10 al	0)		A	DDIT. FEE		JOR ,	ADDIT. FEE		
ပ		CLAIMS	2010	(Colum	ST	(Column 3)	_			, ,	· · · · · · · · · · · · · · · · · · ·		
NDMENT	78-1-17:	REMAINING AFTER		NUMB PREVIO		PRESENT EXTRA	İ	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	AMENDMENT		PAID F			L		FEE] [HAIE	FEE	
	Independent	•	Minus	**		=		X\$ 9=		OR	X\$18=		
¥			Minus	CNDENT		=		X40=		1,, 1	X80=		
THIS THESENTATION OF MULTIPLE DEPENDENT CLAIM										OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OR A	TOTAL DDIT. FEE		
1	The "Highest Num	ber Previously Paid	For (Total or	Independer	nt) is the	highest number	found	d in the ap	propriate bo	x in çolu	mn 1.		
												1	